

LETTERS

RURality AND SUICIDE

The research of Singh and Siahpush reported in the July 2002 issue of the Journal contributes substantially to our understanding of the changing demographics of suicide in the United States.¹ Most significantly, the authors have demonstrated that while suicide rates fell or remained static for most groups over the 28 years examined, they have risen substantially for rural men.

While the fact of high and rising suicide rates for rural men is indisputable, the causes remain obscure. The authors suggest that rurality may serve as a marker for low levels of social integration and that social and demographic changes may have affected rural areas more adversely than urban areas. However, these explanations are not wholly satisfying. Density of population is, at best, a poor marker of social integration, in that many rural residents know their neighbors well, while anonymity is more characteristic of urban life. And while social and demographic changes have affected rural areas significantly in recent decades, other powerful forces have been at work in urban areas; the net effect of these changes is open to question in both settings. Finally, male–female differences in rural suicide rates remain unexplained.

Consideration of agrarian cultural values may provide additional insights into high rural male suicide rates. In an examination of the family farm in America, Hanson noted that the farmer—especially the male farmer—tends to place high value on self-reliance and independence, while distrusting government, innovation, and authoritarianism.² In rural culture, health tends to be understood in terms of continuing ability to work and meet responsibilities,³ and independence may be seen as including self-reliance in the face of illness.⁴ The nature of social contracts may also differ between rural and urban communities, with greater emphasis on charity and less emphasis on entitlement in rural areas.⁵ Additionally, geographic and cultural barriers to seeking mental health services in rural areas may be significant.⁶ Taken together, dependence and help seeking—for physical or mental needs—may be much less acceptable in rural culture than in urban culture. In this light, cultural context may go further to explain high suicide rates than the putative social isolation of rural communities.

Ultimately, suicide reflects a determination that death is preferable to life. Such a determination cannot be understood without a thorough understanding of the culture in which it occurs. ■

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